

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

16523 U.S. PTO  
120303  
Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

22154 U.S. PTO  
10/726773  
120303

## NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of

Inventor(s): Frank Braymand

For (title): IMPROVED CRASH BOX

**1. Type of Application**

This application is for an original (nonprovisional).

**2. Papers Enclosed**

- A.** Required for filing date under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 (Design) Application

5 Page(s) of Specification

3 Page(s) of Claims

2 Sheet(s) of Drawing(s)--Formal (Figs. 1-4)

- B.** Other Papers Enclosed

**EXPRESS MAILING UNDER 37 C.F.R. § 1.10\***

(Express Mail label number is **mandatory**.)

(Express Mail certification is optional)

I hereby certify that this paper, along with any document referred to, is being deposited with the United States Postal Service on this date December 3, 2003 in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 as "Express Mail Post Office to Addressee" Mailing Label No. EL992427168US.

Roni L. MASQUELIER

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Date: 12-03-03

Roni L. Masquelier

Signature of person certifying

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"Since the filing of correspondence under § 1.10 without the Express Mail mailing label thereon is an oversight that can be avoided by the exercise of reasonable care, requests for waiver of this requirement will not be granted on petition." Notice of Oct. 24, 1996, 60 Fed. Reg. 56,439, at 56,442.

2 Page(s) of declaration and power of attorney  
 1 Page(s) of abstract  
 2 Page(s) of Application Data Sheet

**3. Declaration or Oath**

Enclosed - Unexecuted.

**4. Language**

English

**5. Assignment**

An assignment of the invention to L&L Products, Inc. will follow.

**6. Certified Copy**

Certified copy of application:

| <u>Country</u> | <u>Application Number</u> | <u>Filed</u> |
|----------------|---------------------------|--------------|
| Europe         | 03077275.0                | 07/21/2003   |

from which priority is claimed will follow.

**7. Fee Calculation (37 C.F.R. § 1.16)**

Regular Application

| CLAIMS AS FILED  |   |    |              |   |   |      |        |  |    |      |
|--|---|----|--------------|---|---|------|--------|--|----|------|
| Number Filed   |   |    | Number Extra |   |   | Rate |        | Basic Fee<br>37 C.F.R. § 1.16(a)<br>\$770.00 |    |      |
| Total<br>Claims (37 C.F.R<br>§ 1.16(c))                        |   |    |              |   |   |      |        |  |    |      |
| 20   | – | 20 | =            | 0 | x | \$   | 18.00  | =  | \$ | 0.00 |
| Independent<br>Claims (37 C.F.R §<br>1.16(b))                  |   |    |              |   |   |      |        |  |    |      |
| 2  | – | 3  | =            | 0 | x | \$   | 86.00  | =  | \$ | 0.00 |
| Multiple Dependent<br>Claim(s), if any (37 C.F.R §<br>1.16(d)) |   |    |              |   |   |      |        |  |    |      |
|  |   |    |              |   |   | \$   | 280.00 | \$   |    | 0.00 |
| Filing Fee Calculation   |   |    |              |   |   |      |        | \$770.00                                     |    |      |

**8. Fee Payment Being Made at This Time**

Enclosed

Filing Fee \$770.00

**Total Fees Enclosed \$770.00**

**9. Method of Payment of Fees**

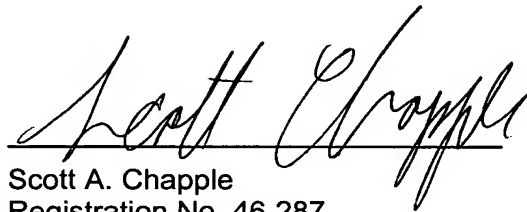
Attached is a check in the amount of \$770.00.

Charge any additional fees required by this paper to deposit account 50-1097.

**10. Instructions as to Overpayment**

Refund.

Date: 12-2-03



Scott A. Chapple  
Registration No. 46,287  
DOBRUSIN & THENNISCH PC  
401 South Old Woodward Avenue  
Suite 311  
Birmingham, MI 48009  
248-593-9900  
Customer No. 25215